

Healthy Moms Healthy Babies Program

Public Act 87 of 2021

January 1, 2022

Sec. 1348. From the funds appropriated in part 1, the department shall submit a report by January 1 of the current fiscal year to the senate and house appropriations committees, the senate and house appropriations subcommittees on the department budget, the senate and house fiscal agencies, and the senate and house policy offices on any request for proposals issued by this state for the healthy moms healthy babies program and on any healthy moms healthy babies programs that are established.



The Healthy Moms, Healthy Babies Program/Initiative is a comprehensive, multi-pronged effort aimed at improving maternal and infant health outcomes. Access and linkage to evidenced-based, high quality home visiting programs, medical insurance coverage, and mental and behavioral health services are critical components of the Healthy Moms, Health Babies Program.

1348 PA 87 of 2021 expanded evidence-based home visiting to support families who are experiencing challenges and through that support, prevent children from being removed from their homes and placed into foster care. This expansion is part of the state's commitment to pivot in the child welfare system to a prevention focused lens under the Families First Prevention Services Act (FFPSA).

Only three home visiting models were eligible to receive the funding, Nurse-Family Partnership, Healthy Families America and Parents as Teachers. Family Spirit is also an eligible model that is specifically for Native American families. MDHHS-Home Visiting Unit (HVU) and the Children's Services Agency worked with the Inter-Tribal Council (ITC) of Michigan and representatives from the Michigan Tribes to determine the best process to expand the Family Spirit model, which is to continue allocating funding to the ITC to support implementation of the Family Spirit model.

MDHHS-HVU and the Children's Services Agency conducted a data analysis that included the statewide home visiting needs assessment data, the FFPSA needs assessment, the number of children aged 0-5 for whom child welfare services was initiated by county, and other points including the likelihood of children being removed from the home in specific counties. This provided understanding of those communities in Michigan in which families were more likely to be having experiences that brought them to the attention of Child Welfare and which should be identified as priority for expansion. The top 8 communities were identified and a scan indicated which evidence-based home visiting was already in place. Not all three eligible models were implemented in each county. If there was more than one of the models that were eligible for expansion implemented in the community, all were contacted regarding the opportunity to expand. Not all communities were ready and able to support an expansion at that time. An RFP was not necessary as there was not competition between the models.